

## DECLARATION FOR PATENT APPLICATION

As the below-named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated next to my name. I believe I am the original, first and sole inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled **Methods and Compositions for the Enhancement of Wound Healing**, the specification of which is attached hereto. I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, § 1.56(a).

I hereby claim the benefit under Title 35, United States Code, § 120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, § 112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, § 1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

60/396,366

07/17/02

Pending

*Application Serial No.*

*Filing Date*

*Patented, Pending or Abandoned*

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment or both, under § 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full Name of Sole or First Inventor: **Donna L. Livant**

Inventor's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Residence: 2625 Antietam Drive, Ann Arbor, MI 48105

Citizenship: United States of America

Post Office Address: 2625 Antietam Drive, Ann Arbor, MI 48105

Attorney Docket No.: UM-08199

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of: Donna L. Livant  
Serial No.:  
Filed:  
Entitled: **Methods and Co**

Group No.:  
Examiner:

## Methods and Compositions for the Enhancement of Wound Healing

## POWER OF ATTORNEY BY ASSIGNEE

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

The Regents of the University of Michigan, as Assignee of record of the entire interest of the above-identified patent application, hereby appoints the members of the firm of MEDLEN & CARROLL, LLP, a firm composed of:

Jaen Andrews	(Reg. No. 35,051)	David A. Casimir	(Reg. No. 42,395)
Tanya A. Arenson	(Reg. No. 47,391)	Maha A. Hamdan	(Reg. No. 43,655)
Jason R. Bond	(Reg. No. 45,439)	Thomas C. Howerton	(Reg. No. 48,650)
Thomas J. Bordner	(Reg. No. 47,436)	J. Mitchell Jones	(Reg. No. 44,174)
Mary Ann D. Brow	(Reg. No. 42,363)	Christine A. Lekutis	(Reg. No. 51,934)
Thomas W. Brown	(Reg. No. 50,002)	David J. Wilson	(Reg. No. 45,225)
Peter G. Carroll	(Reg. No. 32,837)	Jay Pattumudi	(Reg. No. 52,104)

as its attorneys with full power of substitution to prosecute this application and transact all business in the Patent and Trademark Office in connection therewith.

Please direct all future correspondence and telephone calls regarding this application to:

David A. Casimir  
MEDLEN & CARROLL, LLP  
101 Howard Street, Suite 350  
San Francisco, California 94105

Telephone: 415/904-6500  
Facsimile: 415/904-6510

I hereby certify that the Assignment document filed with the application or filed subsequent to the filing date of the application, has been reviewed and I hereby certify that, to the best of my knowledge and belief, title is with The Regents of the University of Michigan.

Dated: \_\_\_\_\_

By: Kenneth J. Nisbet  
Executive Director, UM Technology Transfer  
The Regents of the University of Michigan  
3003 S. State Street, 2071 Wolverine Tower  
Ann Arbor, Michigan 48109-1280